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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT		(\$)		910.00	
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Complete if Known	
Application Number	09/701,910-Conf. #1060
Filing Date	02/20/01
First Named Inventor	Alfred Eckert
Examiner Name	M. C. Graham
Art Unit	3683
Attorney Docket No.	AP9285

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METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 50-3145 Deposit Account Name: Honigman Miller Schwartz and Cohn LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims 20 **Extra Claims** x **Fee (\$)** = **Fee Paid (\$)**

Multiple Dependent Claims
Fee (\$) **Fee Paid (\$)**

Indep. Claims 3 **Extra Claims** x **Fee (\$)** = **Fee Paid (\$)**

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
<u>100</u>	<u>750</u>	<u>(round up to a whole number) x</u>	<u></u>	<u></u>

4. OTHER FEE(S)

Description	Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)	
Other (e.g., late filing surcharge): 1251 Extension for response within first month	120.00
1801 Request for continued examination (RCE) (see 37 ...)	790.00

SUBMITTED BY

Signature	Registration No. (Attorney/Agent)	33,373	Telephone (248) 566-8500
Name (Print/Type)	Joseph V. Coppola, Sr.	Date	August 3, 2005

I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, facsimile no. 571-273-8300, on the date shown below.

Dated: 8/8/05 Signature: Joyce A. Krumpke (Joyce A. Krumpke)